

**PATENT**

Case Docket No. CARDIFF.053A

Date: November 9, 2004

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In re application of : Isaac Mayzlin  
App. No. : 09/938,804  
Filed : August 24, 2001  
For : ENHANCED OPTICAL  
RECOGNITION OF DIGITIZED  
IMAGES THROUGH SELECTIVE  
BIT INSERTION  
Examiner : Brian Q. Le  
Art Unit : 2623

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

November 9, 2004

(Date)

*Raimond J. Salenicks*  
Raimond J. Salenicks, Reg. No. 37,924

**COMMISSIONER FOR PATENTS**

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Response to Restriction Requirement in the above-identified application.

(X) An extension of time to respond for one (1) month is hereby requested.

Time Extension Fee: (X) one month (\$55 small entity)

The fee has been calculated as shown below:

| CLAIMS AS FILED  |   |    |                                       |                  |       |                   |
|--|---|----|---------------------------------------|------------------|-------|-------------------|
|  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |    | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE  | ADDITIONAL<br>FEE |
| Total Claims   | 28  | —  | 28                                    | = 0 ×            | \$9   | = \$0             |
| Independent Claims   | 9   | -- | 9                                     | = 0 ×            | \$44  | = \$0             |
| If application has been amended to contain multiple dependent claim(s), then add |   |    |                                       |                  | \$150 | = \$0             |
| Time Extension Fee   |   |    |                                       |                  |       | \$55              |
| TOTAL ADDITIONAL FEE<br>FOR THIS AMENDMENT                                       |   |    |                                       |                  |       | \$55              |

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- (X) Return prepaid postcard.
- (X) A check in the amount of \$55 is enclosed.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



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Raimond J. Salenieks  
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Agent of Record  
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